PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE rEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence inclusing the Fatent, advance orders and notification of maintenance fees will be maintened to the current correspondence address as infinited undersecorded below or directed otherwise in Block; by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

49584 7599 057242006 LEE & HAYES, PLLC 421 W. RIVERSIDE AVE. SUITE 500 SPOKANE, WA 99201				papers. Each addition have its own certificat Ce I hereby certify that t States Postal Service addressed to the Ma transmitted to the US	ais certificate cannot be used al paper, such as an assignme of mailing or transmission. Trifficate of Mailing or Transmittal is being the such as a such as	ent or formal drawing, must
						(Date)
APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR			ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/706,788	11/12/2003		John LoC	Guidice	BE1-0013US	7180
TITLE OF INVENTION: C	EANN REMOVES					
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	МО	\$1400		\$300	\$1700	08/24/2006
EXAMINER		ART UNIT		CLASS-SUBCLASS		
CAZAN, LIVIUS RADU		3729		029-755000	-	
I. Change of correspondence address or indication of "Fee Address" (37 CFR 1.33). Change of correspondence address (or Change of Correspondence Address form PTO/SBI 122) attached. "Fee Address" indication (or "Ree Address" Indication form PTO/SBI 47; Rev 03-00 or more recent) attached. Use of a Customer Number is required.			2. For printing on the pastent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to listed, no name will be printed.			

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filled for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

BellSouth Intellectual Property Corporation

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

Wilmington, DE

Please check the appropriate assignee category or categories (will not be printed on the patent) : 🔲 Individual 🛱 Corporation or other private group entity 🖵 Government

4a. The following fee(s) are enclosed: XX Issue Fee Advance Order - # of Copies

4b. Payment of Fee(s):

A check in the amount of the fee(s) is enclosed.

Publication Fee (No small entity discount permitted)

Payment by credit card.

The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to (cnclose an extra copy of this form). Deposit Account Number

Note: A certificate of mailine can only be used for domestic mailines of the

5. Change in Entity Status (from status indicated above)

a, Applicant claims SMALL ENTITY status, See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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marrow Authorized Signature

10-08-2006

Typed or printed name Shirley L. Anderson

57763 Registration No.

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